STATE OF NEW HAMPSHIRE

RECEIVED

	2017 Statement of for LC (RSA C	OCT 25 201	
PLEASE	NEW HAMPSHIF DEPARTMENT OF S		
I. Name of Lobbyist(s) Jame	es J. Bianco, Jr.; Adam Sch	midt; Karen Soucy; k	(athy Corey Fox
II. Name of lobbyist's partner	rship, firm or corporation, if any:		
Bianco Professional	Association		
(Name of partr	nership, firm or corporation)		
18 Centre Street	Concord	NH	03301
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
(603) 225-7170 (Telephone)	(603) 226-0165 (Fax)	e-mail .attys@b	iancopa.com_
·	hoose one – file separate reports fons which are not attributable to an		y file a separate report for
X All reportable transactions	occurring in the months prior to the r	reporting date relative to the	e following elient:
Coalition of Insurance	and Financial Producers		
(Full Na	ame of Client as it appears on the Lobbyi	st Registration Form)	
All reportable transactions burnelated to any particular elier	oy the lobbyist (including the lobbyis nt.	t's family), or the lobbying	firm listed below which are
IV. Date of Report April 2	26. 2017	July 26, 2017	

Reports cover:

(Print Name of lobbyist)

activity from date of registration to 3/31/17

activity from 4/1/17 to 6/30/17

October 25, 2017 X

January 31, 2018 -

activity from 7/1/17 to 9/30/17

activity from 10/1/17 to 12/31/17

V. There have been no fees received and no reportable transactions made since the last report. If this box is checked, complete just this form and submit it to the Secretary of State's Office. State House, Room 204. Concord, NH 03301.

VI. Check if additional reports are attached:

If you have received fees or made expenditures, you must file Addendum A- Fees and Expenses

If you have paid an honorarium or reimbursed expenses, you must file Addendum B- Report of Honorariums or Expense Reimbursement

11 If you, your firm, or your family has made political contributions, you must file Addendum C- Political Contributions

Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief. (Signature of lobbyist) James J. Bianco, Jr.

P E A S E P R I N

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

II. Name of lobbyist's partnership, firm or corporation, if any:			
Bianco Professional Association			
(Name of partnership, firm or corporation)			
III. Name of Client Coalition of Insurance and Financial Producers	Date	. 10/25/17	
IV. Fees Received Indicate the gross amount of all fees received from the client identified above t to lobbying, including fees for services such as public advocacy, government rincluding research, monitoring legislation, and related legal work. The gros reduced by any expenses:	elation:	s, or public relations servic	
a) Total of all fees received in this reporting period	a) \$	4,370	
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$ ir)	20,850	
c) Total of all fees received to date (Add lines a and b)	c) \$	25,220	
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$	465	
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repofees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report mexpenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office expindividual expenses where the expenditure was of \$25.00 or less (for example hunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this reportant purpose not covered by (a) (for example; purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greater	ient and ay be f aggrega senses; meals than \$ with a ting per of gre than \$ expense	I if expenditures are made filed for the lobbyist(s) fir the total of all expenses part (b) the aggregate total of purchased during a busing 10 that is given to the personal value of \$25.00 or less); a find of greater than \$25.00 ater than \$25, purchase of \$25, but not greater than \$35 are reimbursement, or political first political for the same and the same are reimbursement.	
restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported		gendum A.	
contributions will be reported on separate addendums and should not be reported a) Total aggregate expenses for this reporting period for salaries, benefits,	a) \$	6,315	
restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying. b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.			

d) Total expenses for (Add lines a	or this reporting period a, b and c)			d) \$ 6,315	
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)			e) \$ 19,370		
f) Total of all expenses year to date				f) \$ 25,685	
		itures of more than \$25 n charged.	made from lo	obbying fees during	this reporting
Paid to:				Amount:	
	·· 			\$	
	·			\$	-
<u></u>				\$	
	-			\$	
=				\$	
			-	\$	
Sworn Statement	Affirmation by Lo	bbyist			
		664 and hereby sw knowledge and belief		n that the foregoir	ig information
		M_		10/25/17	
(Signature of lobb	yist) Y			(Date)	
James J. Bianco					
(Print Name of lob	obyist)				

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

me of Lobbying partnership, firm, or corporation: Bianco Professional Association
me of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any
rticular client): Coalition of Insurance and Financial Producers
te of Report (check one):
pril 26, 2017 □ July 26, 2017 □ October 25, 2017 ★ January 31, 2018 □
have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and a following Addendums submitted with that Statement (insert the number of Addendum forms being pomitted): Addendum A(s).
Addendum B(s).
Addendum C(s).
pereby swear or affirm that the foregoing information on the Statement and each Addendum is true and emplete to the best of my knowledge and belief. O ((9))
Adam Schmidt
rint Name of lobbyist)

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying partnership, firm, or co	orporation: Bianco Professional Association
	is for the partnership, firm, or corporation and not related to any
particular client): Coalition of Insurar	nce and Financial Producers
Date of Report (check one):	
April 26, 2017 □ July 26, 2017 □	☐ October 25, 2017 ☑ January 31, 2018 ☐
	4, the Statement of Income and Expenses described above, and h that Statement (insert the number of Addendum forms being
Addendum B(s).	
Addendum C(s).	
I hereby swear or affirm that the foregoin complete to the best of my knowledge and	
(Signature of lobbyist)	$\frac{l \sqrt{l \zeta / l \eta}}{l \text{(Date)}}$
Karen Soucy	
(Print Name of lobbyist)	

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying partnership, firm, or corporation: Bianco Professional Association			
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particular client): Coalition of Insural	nce and Financial Producers		
Date of Report (check one):			
April 26, 2017 July 26, 2017	□ October 25, 2017 💢 January 31, 2018 🗆		
	64, the Statement of Income and Expenses described above, and that Statement (insert the number of Addendum forms being		
Addendum B(s).			
Addendum C(s).			
I hereby swear or affirm that the foregoin complete to the best of my knowledge an	ng information on the Statement and each Addendum is true and d belief.		
(Signature of lobbyist)	19 (C the 2017		
Kathy Corey Fox			
(Print Name of lobbyist)			